



PATENT
Customer No. 22,852
Attorney Docket No. 06530.0317

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
Malka BERNDT) Group Art Unit: 3739
Application No.: 10/720,190) Examiner: TOY, ALEX B
Filed: November 25, 2003)
For: MEDICAL DEVICE WITH VISUAL) Confirmation No.: 4220
INDICATOR AND RELATED)
METHODS OF USE)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

TRANSMITTAL LETTER

We enclose an Amendment in reply to an Office Action mailed August 30, 2005. The additional claims fee is calculated as follows.

	Claims Remaining After Amendment		Highest Number Previously Paid	Present Extra	Rate	Additional Fee
Total	36	-	33	3	x \$ 50	\$ 150.00
Indep.	3	-	3	0	x \$200	0.00
<input type="checkbox"/> First Presentation of Multiple Dep. Claim(s)					+\$360	0.00
Subtotal						\$ 150.00
Reduction by ½ if small entity						- 0.00
TOTAL						\$ 150.00

A check for \$150.00 to cover the additional claims fee is enclosed.

Please grant any extensions of time required to enter this Amendment and charge any additional required fees to our deposit account 06-0916.

Dated: November 7, 2005

By: _____

Michael W. Kim
Reg. No. 51,880



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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

AMENDMENT

In reply to the Office Action mailed August 30, 2005, please amend this
application as follows:

Amendments to the Claims are reflected in the listing of claims in this paper.

Remarks follow the amendment section of this paper.

11/08/2005 HALI11 00000032 10720190
01 FC:1202 150.00 0P